

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation SUSAN B ANTHONY LIST INC		3. FEC Identification Number <div>C C90011313</div>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1707 L Street NW Ste 750		
(c) City, State and ZIP Code Washington DC 20036		
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report

☒ July 15 Quarterly Report ☐ 24-Hour Report

☐ October 15 Quarterly Report ☐ 48-Hour Report

☐ January 31 Year-End Report

b) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on / /

5. COVERING PERIOD:

FROM / /

THROUGH / /

6. TOTAL CONTRIBUTIONS.....

7. TOTAL INDEPENDENT EXPENDITURES

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE _____

[Electronically Filed]

Robert Kania

Robert Kania

07/15/2016

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 2 OF 5
FOR LINE 7 OF FORM 5NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee American Marketing and Publishing		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 12 / 2016	
Mailing Address 7380 Sprout Springs Road Ste 210-248		Amount 5975.00	
City Flowery Branch	State GA	Zip Code 30542	Transaction ID : F57.4498
Purpose of Expenditure Doorhangers	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: HILLARY RODHAM CLINTON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5975.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee American Marketing and Publishing		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2016	
Mailing Address 7380 Sprout Springs Road Ste 210-248		Amount 4700.00	
City Flowery Branch	State GA	Zip Code 30542	Transaction ID : F57.4482
Purpose of Expenditure Door Hangers- on 5/14/16, estimated 2600.00, now reporting actual	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: RENEE JACISIN ELLMERS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4700.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Facebook, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 16 / 2016	
Mailing Address 1 Hacker Way		Amount 2499.89	
City Menlo Park	State CA	Zip Code 94025	Transaction ID : F57.4505
Purpose of Expenditure Facebook ads- reported \$2500 on 5/16/16, now correcting to actual	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: RENEE JACISIN ELLMERS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 29221.65		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) _____	

(a) **SUBTOTAL** of Itemized Independent Expenditures..... 13174.89

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures.....
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 3 OF 5
FOR LINE 7 OF FORM 5NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Go Daddy.com		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 16 / 2016	
Mailing Address 14455 N Hayden Rd #219		Amount 12.17	
City Scottsdale	State AZ	Zip Code 85260	Transaction ID : F57.4510
Purpose of Expenditure Web domain	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 02	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: RENEE JACISIN ELLMERS		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought 30233.82			

Full Name (Last, First, Middle Initial) of Payee Headway Workforce Solutions		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 12 / 2016	
Mailing Address 421 Fayetteville Street Suite 1020		Amount 6298.14	
City Raleigh	State NC	Zip Code 27601	Transaction ID : F57.4501
Purpose of Expenditure Votercontact from 5/14-5/31/16- on 5/12/16 reported estimate of \$9107, now correcting amount to actu	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: HILLARY RODHAM CLINTON		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought 6298.14			

Full Name (Last, First, Middle Initial) of Payee Headway Workforce Solutions		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 12 / 2016	
Mailing Address 421 Fayetteville Street Suite 1020		Amount 750.15	
City Raleigh	State NC	Zip Code 27601	Transaction ID : F57.4503
Purpose of Expenditure Mileage Reim from 5/14-5/31/16-on 5/12/16 reported estimate of \$1821.43. now correct to actual	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: HILLARY RODHAM CLINTON		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought 7048.29			

(a) **SUBTOTAL** of Itemized Independent Expenditures.....▶ 7060.46

(b) **SUBTOTAL** of Unitemized Independent Expenditures▶

(c) **TOTAL** Independent Expenditures.....▶

(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 4 OF 5
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee

Headway Workforce Solutions

Date of Public Distribution/Dissemination

MM / DD / YYYY
05 / 14 / 2016

Mailing Address

421 Fayetteville Street

Suite 1020

Amount

16519.43

City

State

Zip Code

Raleigh

NC

27601

Transaction ID : F57.4490

Purpose of Expenditure

Voter contact 5/17-6/7 on 5/14/16 reported estimate 1600.00,
now correcting to actualCategory/
Type

Office Sought:

☒

House

State: NC

☐

Senate

District: 02

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

RENEE JACISIN ELLMERS

Calendar Year-To-Date Per Election
for Office Sought

21219.43

Disbursement For:
2016☒

Primary

☐

General

☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Headway Workforce Solutions

Date of Public Distribution/Dissemination

MM / DD / YYYY
05 / 14 / 2016

Mailing Address

421 Fayetteville Street

Suite 1020

Amount

5502.33

City

State

Zip Code

Raleigh

NC

27601

Transaction ID : F57.4495

Purpose of Expenditure

Mileage reimbursement 5/17-6/7- on 5/14/16 reported estimate
3500.00, now reporting actualCategory/
Type

Office Sought:

☒

House

State: NC

☐

Senate

District: 02

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

RENEE JACISIN ELLMERS

Calendar Year-To-Date Per Election
for Office Sought

26721.76

Disbursement For:
2016☒

Primary

☐

General

☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Headway Workforce Solutions

Date of Public Distribution/Dissemination

MM / DD / YYYY
06 / 03 / 2016

Mailing Address

421 Fayetteville Street

Suite 1020

Amount

9903.12

City

State

Zip Code

Raleigh

NC

27601

Transaction ID : F57.4537

Purpose of Expenditure

6/1-6/30 Payroll- on 6/3/16 reported estimate of \$18,000.00,
now correcting amount to actualCategory/
Type

Office Sought:

☐

House

State: FL

☐

Senate

District: _____

☒

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

HILLARY RODHAM CLINTON

Calendar Year-To-Date Per Election
for Office Sought

16951.41

Disbursement For:
2016☒

Primary

☐

General

☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

31924.88

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 5 OF 5
FOR LINE 7 OF FORM 5NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INC

Full Name (Last, First, Middle Initial) of Payee Headway Workforce Solutions		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 03 / 2016	
Mailing Address 421 Fayetteville Street Suite 1020		Amount 1268.22	
City Raleigh	State NC	Zip Code 27601	Transaction ID : F57.4538
Purpose of Expenditure 6/1-6/30 Payroll- mileageon 6/3/2016 reported estimate of \$1,800.00, now correcting amount to actual		Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: HILLARY RODHAM CLINTON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 18219.63		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Andrew Moore		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 16 / 2016	
Mailing Address 1200 New Hampshire Ave NW Suite 750		Amount 1000.00	
City Washington	State DC	Zip Code 20036	Transaction ID : F57.4508
Purpose of Expenditure Web promotion- originally reported as Susan B Anthony List, that was an error, corrected to Andrew M		Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RENEE JACISIN ELLMERS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 30221.65		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure		Category/Type	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2268.22
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	54428.45